

“The conflict between the will to deny horrible events and the will to proclaim them aloud is the central dialectic of psychological trauma.”

Herman (2005)



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BABCP Accredited Cognitive Behavioural Psychotherapist
Vice-President EMDR Europe
President Trauma Aid Europe



Women & Trauma

- “It has probably become more dangerous to be a woman than a soldier in armed conflict.”
- (Major-General Patrick Cammaert, former Commander of UN peacekeeping forces in the Democratic Republic of Congo)



The Nature of Cruelty

- Cruelty is the deliberate act of causing suffering (Gilbert, 2005)
 - Although the basic aggressive patterns of chimpanzees are remarkably similar to some of our own, their comprehension of the suffering they inflict on their victims is very different to ours. Chimpanzees, it is true, are able to emphasise, to understand at least to some extent the wants and needs of their companions. But only humans, I believe are capable of deliberate cruelty (Goodall, 1990)
- Suffering – other species cause suffering
- Cruelty requires advanced cognitive capabilities
 - Knowing intention to cause pain
 - Empathic torturer



Interpersonal Cruelty

- Women and children are victims of all kinds of physical and sexual abuse on an epidemic scale Even in every day relations, cruelty haunts the lives of many. Taken together – compassion needs to start by being honest about the human potential for cruelty (Gilbert, 2015)

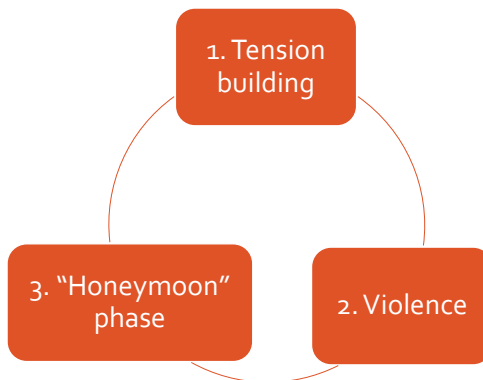


Violence against women: A Gender-Based Phenomenon (UNFAP)

- Not a random phenomenon
- Structural problem embedded in unequal gender power relationships
- Gender dimensions of Violence Against Women (VAW):
 - GBV mainly affects women and girls
 - Women and men experience violence differently
 - Women are more likely to die at the hands of someone they know
 - Women survivors face specific barriers in accessing services
 - Fewer resources and options to access justice, care, and support
 - Laws and implementing authorities often fail to adequately respond to VAW



The Cycle of Violence (*Walker 1978*)



- Over time, phases of aggression increase in severity and duration; “honeymoon” phases become shorter.

- Women develop a strategy for survival (denying abuse, refusing help offered, defending the aggressor).



Gender-Based Violence and Human Rights

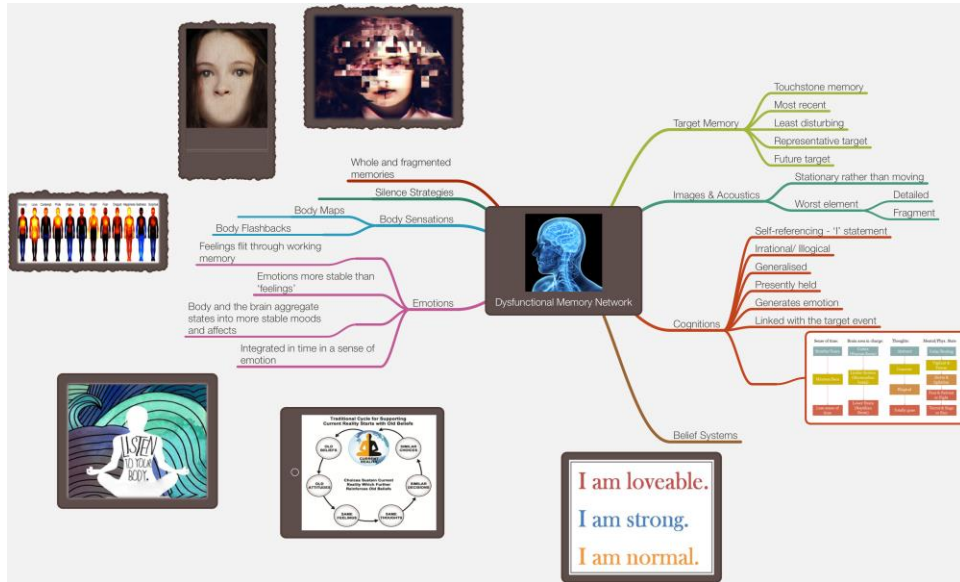
- GBV is a violation of women's human rights and a form of discrimination against women
 - Examples of violated rights:
 - Right to life
 - Right to be free from torture and inhuman or degrading treatment or punishment
 - Right to health
 - Right to equal protection by the law



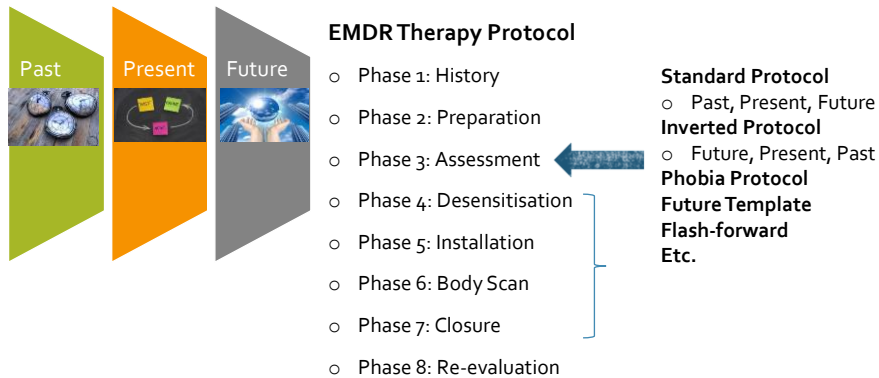
EMDR Therapy

- EMDR therapy is a trans-diagnostic, integrative psychotherapy approach *that is intrinsically 'Client-Centered' at its core*. It has been extensively researched and proven effective for the treatment of adverse life experiences. It utilises a theoretical framework known as adaptive information processing (AIP).
- The context of AIP is that adverse live experiences causes imbalance in the nervous system thus creating blockages or incomplete information processing – namely trauma memories
 - [Farrell (2015) Trans-generational Trauma and EMDR Therapy, BACP Private Practice Journal, Winter Edition 2015]





EMDR Therapy & AIP Case Conceptualisation



Gender Based Violence & EMDR Therapy: **Trauma Confrontation** or **Trauma Stabilisation**



EMDR Therapy – Past, Present & Future

Past



Present



Future

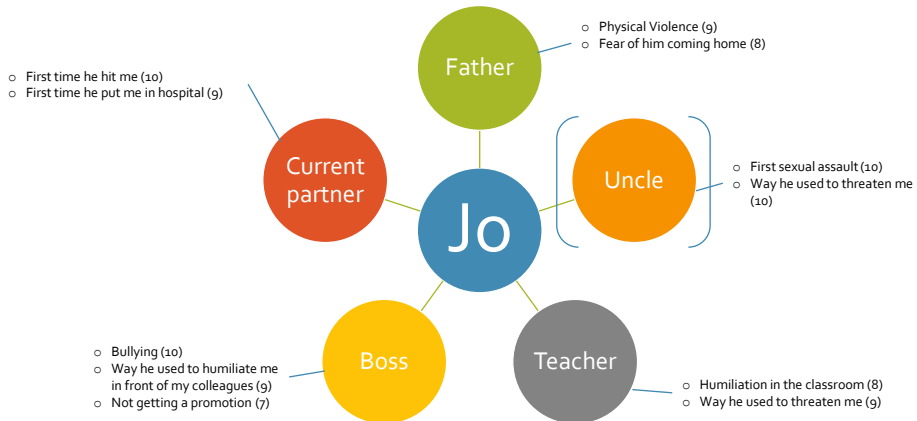




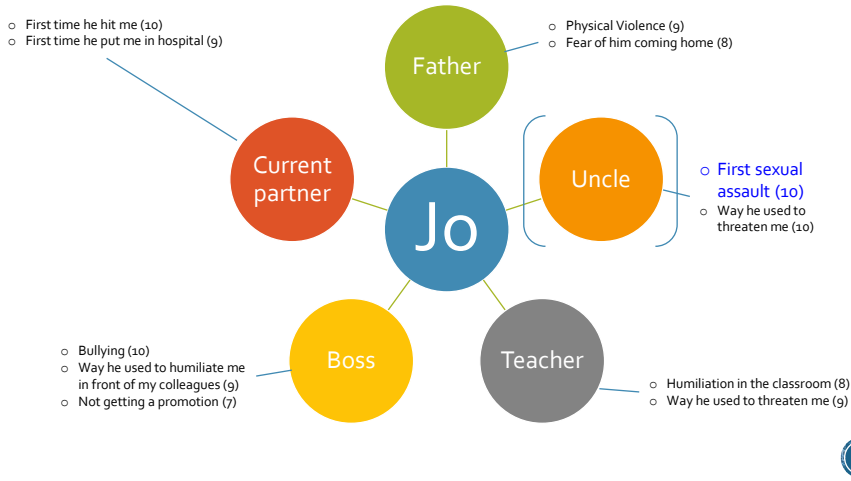
EMDR Therapy – Restricted Processing (EMDr)



EMDR Therapy – Target Clustering

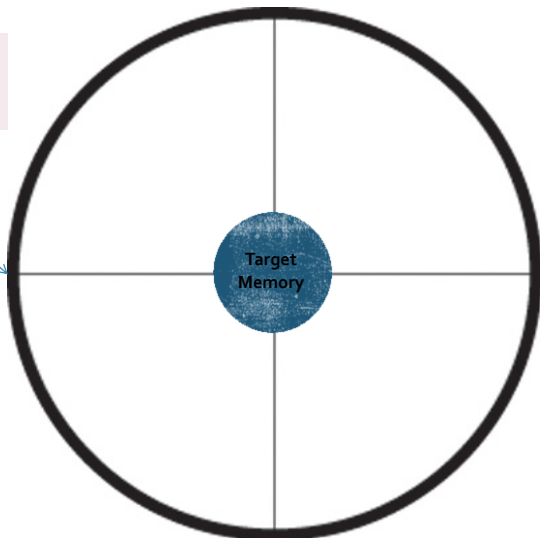


EMDR Therapy – Target Clustering



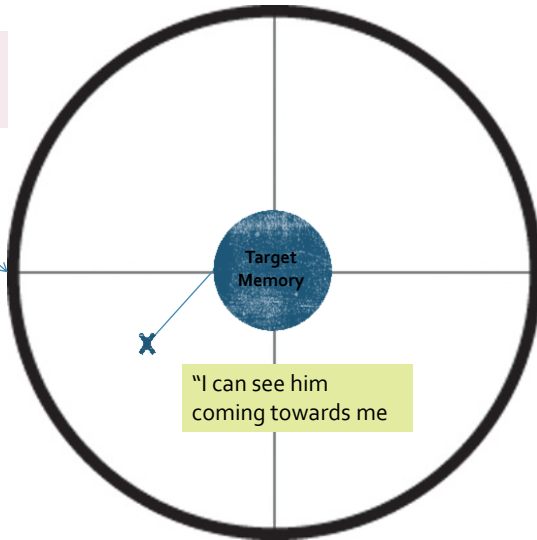
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1. Uncle
2. Memory of the assault



Target Memory: Assault by Uncle
Worst: When he hurt me
C-: "I'm a weak person"
C+: "I am strong"
VOC: 2
Emotion: Sad, angry
SUD: 10
BS: Stomach, chest

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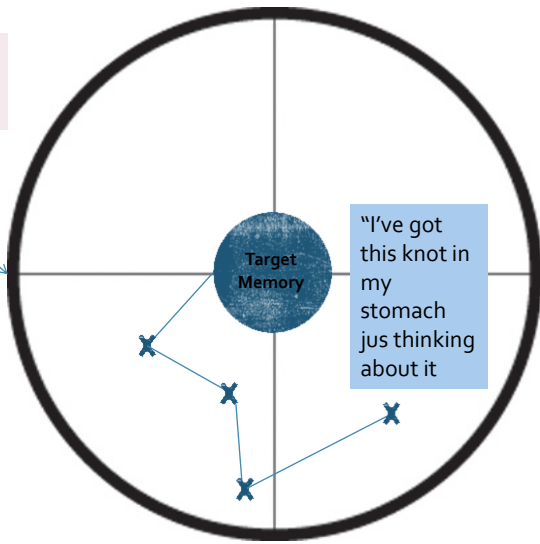
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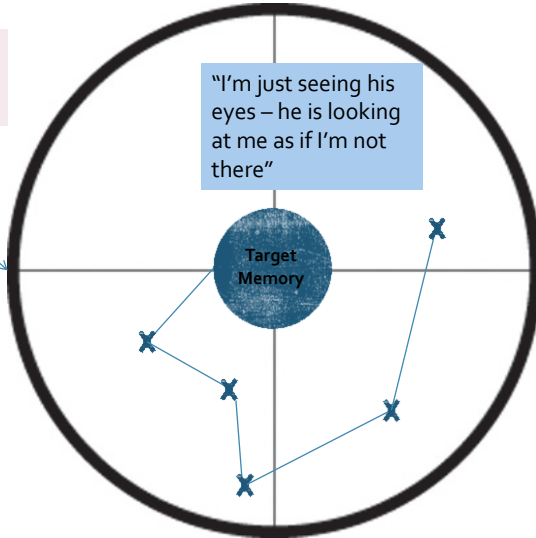
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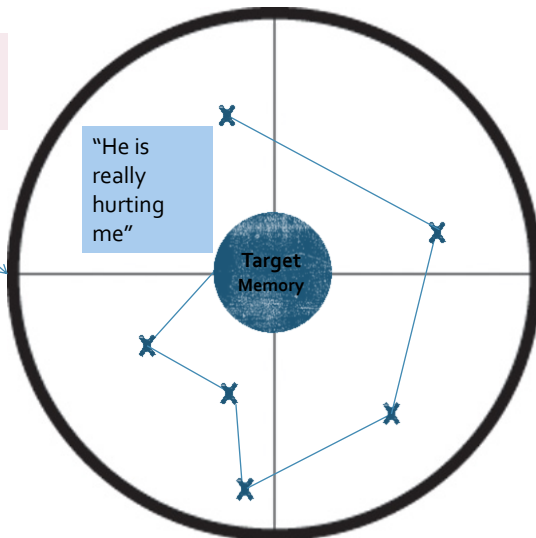
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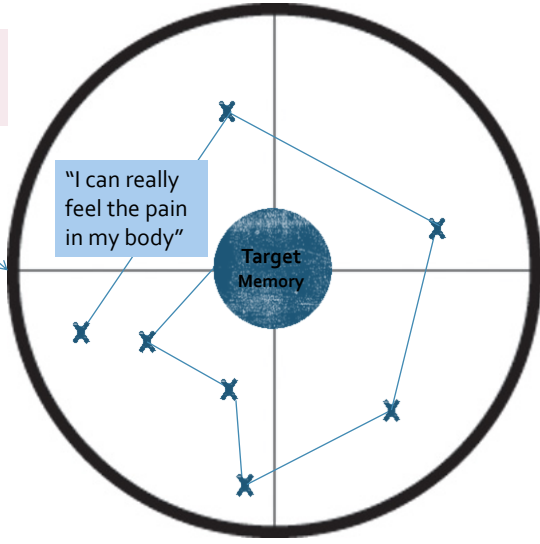
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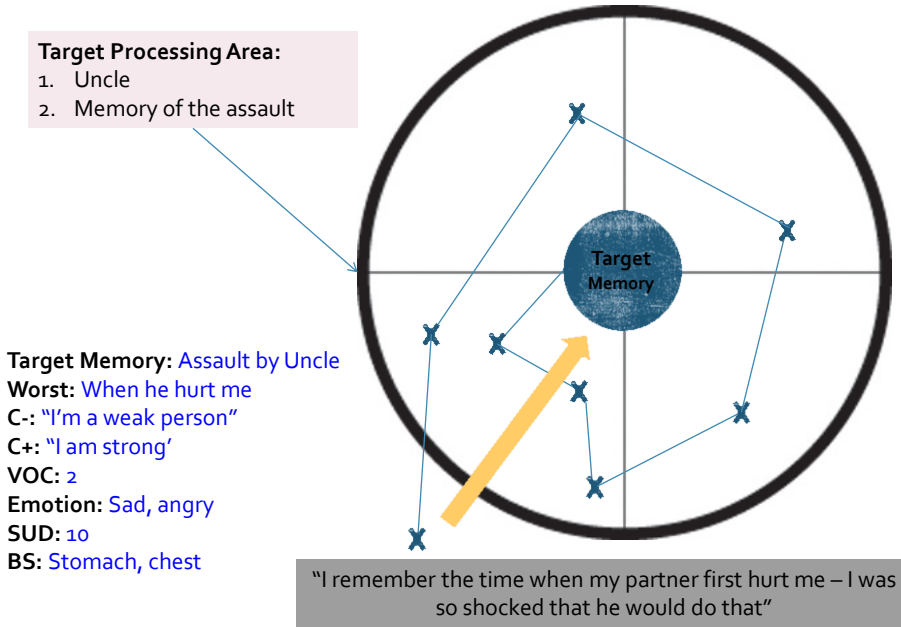


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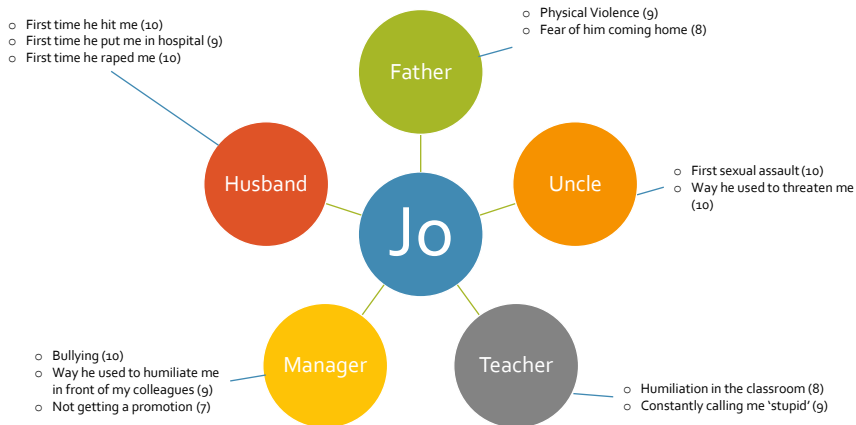


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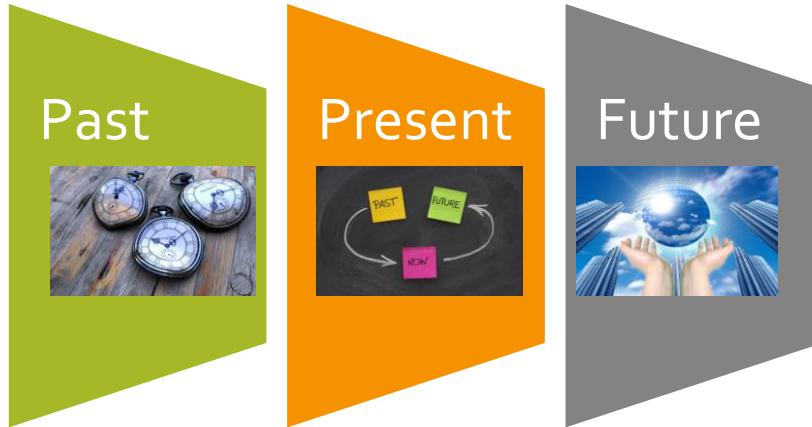
"I remember the time when my partner first hurt me – I was so shocked that he would do that"



EMDR Therapy – Target Clustering



AIP Case Conceptualisation – Past, Present & Future



Inverted Protocol in EMDR Therapy



Risk Assessment in Gender Based Violence – Phase 1 History Taking

1. Has the physical violence increased in severity or frequency over the past year?
2. Does he own a gun?
3. Have you left him after living together during the past year?
4. Is he unemployed?
5. Has he ever used a weapon against you or threatened you with a lethal weapon?
6. Does he threaten to kill you?
7. Has he avoided being arrested for domestic violence?
8. Do you have a child that is not his?
9. Has he ever forced you to have sex when you did not wish to do so?
10. Does he ever try to choke you?
11. Does he use illegal drugs? By drugs, I mean "uppers" or amphetamines, Meth, speed, angel dust, cocaine, "crack", street drugs or mixtures.
12. Is he an alcoholic or problem drinker?

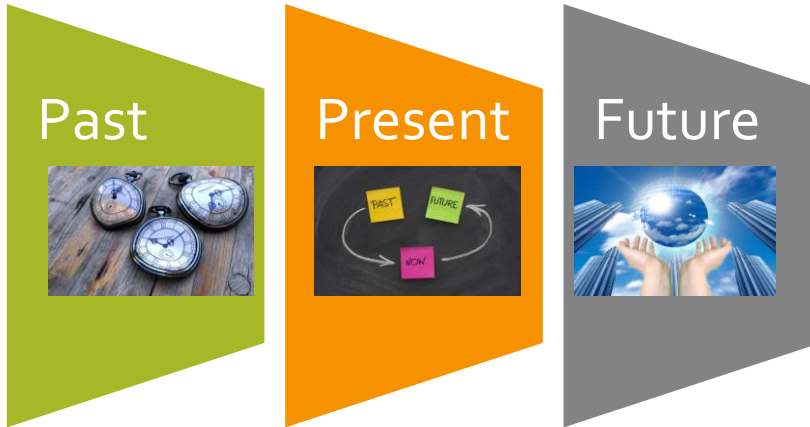


Risk Assessment in Gender Based Violence – Phase 1 History Taking

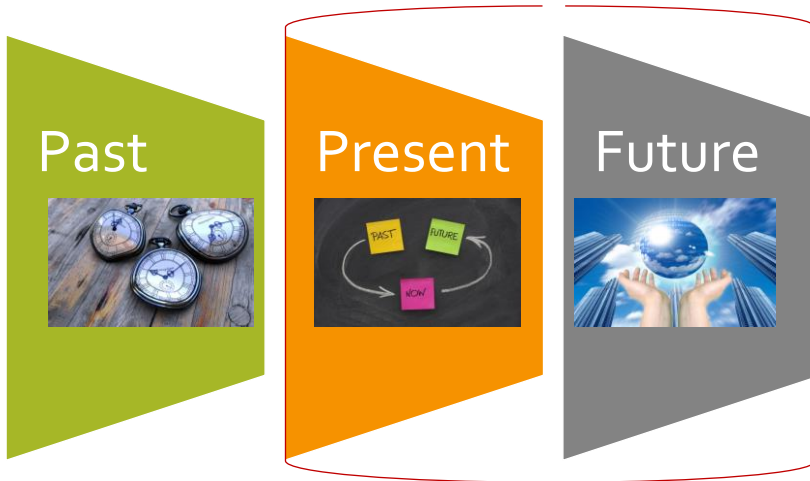
13. Does he control most or all of your daily activities? (For instance: does he tell you who you can be friends with, when you can see your family, how much money you can use, or when you can take the car? (If he tries, but you do not let him, check here:
14. Is he violently and constantly jealous of you? (For instance, does he say "If I can't have you, no one can").
15. Have you ever been beaten by him while you were pregnant?
16. Has he ever threatened or tried to commit suicide?
17. Does he threaten to harm your children?
18. Do you believe he is capable of killing you?
19. Does he follow or spy on you, leave threatening notes or messages on answering machine, destroy your property, or call you when you don't want him to?
20. Have you ever threatened or tried to commit suicide?



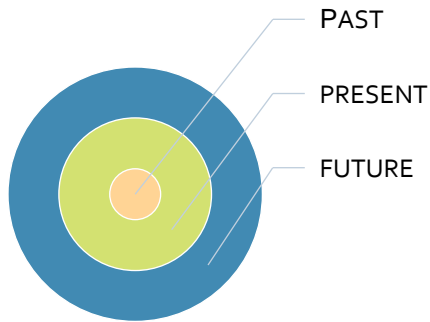
AIP Case Conceptualisation – Past, Present & Future



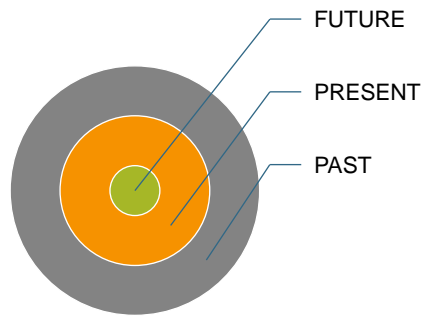
Past, Present & Future **RISK ASSESSMENT**



EMDR Protocols for Complex PTSD

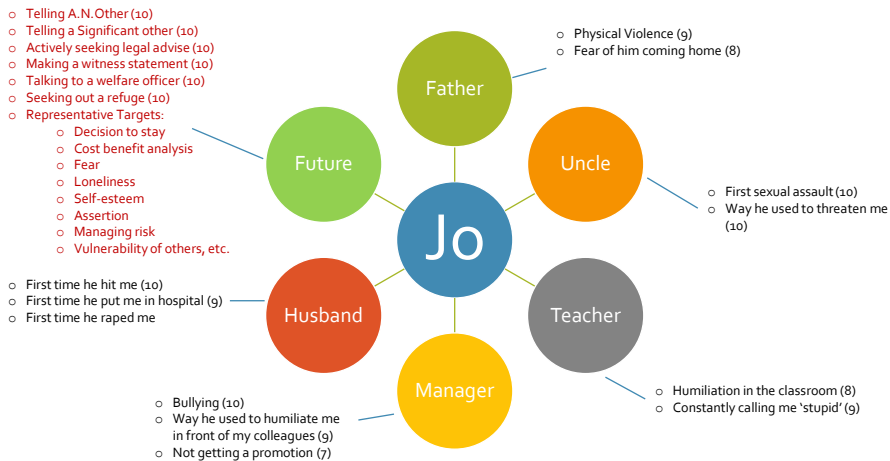


CONVENTIONAL PROTOCOL – Past traumatic material, Present triggers, Future template & resources



Hofmann's (2009) INVERTED PROTOCOL – Future Resources, Present triggers, & Past traumatic material

EMDR Therapy – Target Clustering

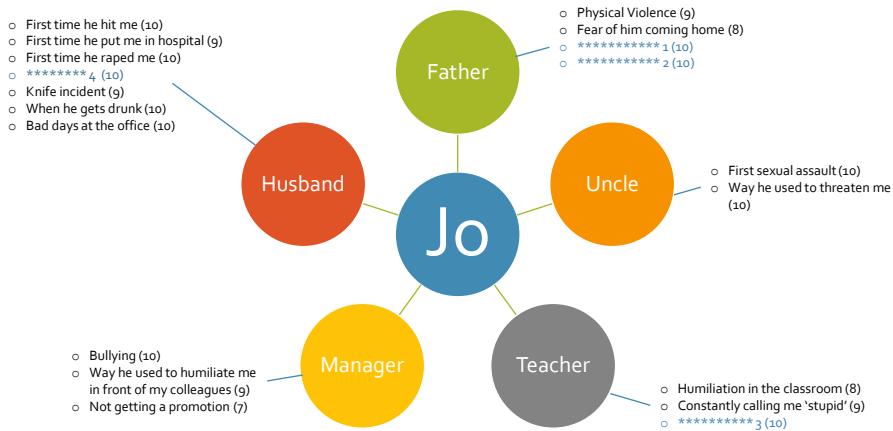


Blind 2 Therapist Protocol in EMDR Therapy for Complex Trauma

(Adapted from Shapiro, 2001 & Blore, 2013)



EMDR Therapy – Target Clustering

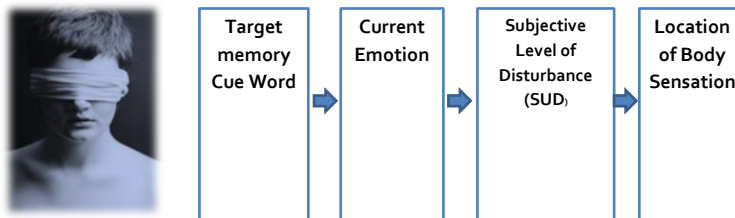


Blind 2 Therapist Protocol (adapted from Sahprio, 2001 & Blore, 2013) - Rational

- Target memory involves, high levels of shame, guilt, embarrassed disgust, anxiety, trepidation, etc.
- Fear of losing control
- Fear of rejection
- Inability to describe
- Over-responsibility towards the therapist and their reaction, perspective, well-being, vicariously traumatising, etc
- For example: ♦ A client with a history of sexual abuse who is ashamed a specific experience that generates profound feelings of disgust. As a result they do not wish to divulge the target image for fear of disgust or revulsion by the therapist.



Phase 3: Modified Assessment of Target Memory (B2T)



GBV – Engaging Men in Violence Prevention

- Strengthening knowledge and awareness of Gender-Based Violence
- Involvement of legislative advocacy reaching out to men in power
- Resources should be best served towards primary prevention
- Focus also on Tertiary prevention – perpetrator treatment
- Redefining masculinity at an individual, community and societal level



Many thanks for your time



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